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UTILITY **PATENT APPLICATION** TRANSMITTAL

Please type a plus sign (+) inside this box —

Attomey Docket No. First Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICA	TION ELEMENTS	ASSISTANT Commissioner for Patents ADDRESS TO: Box Patent Application				
See MPEP chapter 600 concerning utility patent application contents.		ADDRESS 10. Box Patent Application Washington, DC 20231				
Fee Transmittal Fo	orm (e.g., PTO/SB/17)	7. CD-ROM or CD-R in duplicate, large table or				
(Submit an original and a d	duplicate for fee processing) mall entity status.	Computer Program (Appendix)				
2. See 37 CFR 1.27.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. Specification (preferred arrangement	[Total Pages [13]] set forth below)	a. Computer Readable Form (CRF)				
- Descriptive title	of the invention e to Related Applications	b. Specification Sequence Listing on:				
	e to Related Applications arding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or				
	quence listing, a table,	ii. 🔲 paper				
or a computer p - Background of	rogram listing appendix the Invention	c. Statements verifying identity of above copies				
- Brief Summary	of the Invention	ACCOMPANYING APPLICATION PARTS				
- Brief Description - Detailed Description	n of the Drawings (<i>if filed</i>)	9. Assignment Papers (cover sheet & document(s))				
- Claim(s)		37 CFR 3.73(b) Statement Power of				
- Abstract of the	Disclosure	10. (when there is an assignee) Attorney				
.4. Drawing(s) (35 U	.S.C. 113) [Total Sheets 5]	11. English Translation Document (if applicable)				
5. Oath or Declaration	[Total Pages [18]]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
a. Newly execu	uted (original or copy)	13. Preliminary Amendment				
Copy from a	om a prior application (37 CFR 1.63 (d)) tinuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) 15. Certified Copy of Priority Document(s (if foreign priority is claimed)					
named in t	the prior application, see 37 CFR and 1 33(b)	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35				
6 Application Data	Shoot See 27 CED 1.76	or its equivalent.				
6. Application Data Sheet. See 37 CFR 1.76						
		y the requisite information below and in a preliminary amendment,				
or in an Application Data She	 1					
	Continuation Divisional Continuation-in-part (CIP) of prior application No/					
Prior application information	Examiner	Group Art Unit prior application, from which an oath or declaration is supplied under				
		tion or divisional application and is hereby incorporated by reference.				
The incorporation can only be		ently omitted from the submitted application parts.				
	19. CORRESPONDEI	NCE ADDRESS				
Customer Number or Bar Co	ode Label (Insert Customer No. or Attach bar o	or Correspondence address below				
Name	Thomas M	. Holman				
	% Fitter Equipy	ment Technologies, Inc.				
Address	1003 SE 12th	Ave #1				
City		State FL Zip Code 33990				
Country		phone (941) 458-8522 Fax (941)458-22				
Name (Print/Type)	THOMAS M. HOLMAN					
	4/	Pate (2/27/01				

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PTO/SB/17 (11-01)
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FEE TRANSMITTAL		Complete if Known				
FEE IRANS	Application Number					
for EV (Filing Date					
for FY 2	First Named Inventor	Thomas	<u>M.</u>	Holman		
the state of the s		Examiner Name				
Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit				
TOTAL AMOUNT OF PAYMENT	(\$) 37 <i>0.00</i>	Attorney Docket No.				

NETLION OF DAVISENT (short all that annie)		FEE CALCULATION (continued)				
METHOD OF PAYMENT (check all that apply)	+					
Check Credit card Money Order Other None		3. ADDITIONAL FEES				
Deposit Account		Entity				Fee Paid
Deposit	Fee	Fee le (\$)	Fee Code	Fee e (\$)	Fee Description	ree raiu
Account Number	105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Name	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	147	2,520	147	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this applicate	on 112		112	920*	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account		4 0404	112	1 040*	Examiner action Requesting publication of SIR after	
FEE CALCULATION	1 113	1,840*	113	1,040	Examiner action	
		110	215	55	Extension for reply within first month	
A. BASIC FILING FEE Large Entity Small Entity	116	400	216	200	Extension for reply within second month	<u> </u>
Fee Fee Fee Fee Description	117	920	217	460	Extension for reply within third month	
Code (3)	118	1,440	218	720	Extension for reply within fourth month	
101 740 201 370 Utility filling fee 201 106 330 206 165 Design filling fee	128	1,960	228	980	Extension for reply within fifth month	
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal	
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	12′	280	221	140	Request for oral hearing	
		3 1,510	138	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) _370.00		110	240	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSU	E 14	1 1,280	241	640	Petition to revive - unintentional	
Extra Claims below Fee Pa	I	2 1,280	242	640	Utility issue fee (or reissue)	
Total Claims20** = X =		3 460	243	230	Design issue fee	
Independent - 3** = X = X	- 14		244	310	Plant issue fee	
Multiple Dependent	_ 12		122		Petitions to the Commissioner	
Large Entitle Occupied Entitle	12		123	50	Processing fee under 37 CFR 1 17(q)	
Large Entity Small Entity	12		126	180	Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	58	1 40	581	40	Recording each patent assignment per property (times number of properties)	
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3	14	6 740	246	370	Filing a submission after final rejection	
102 84 202 42 independent dams in excess of 5	d		1		(37 ČFR § 1 129(a))	
109 84 209 42 ** Reissue independent claims over original patent	14	9 740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	17	9 740	279	370	Request for Continued Examination (RCE)	
and over original patent	16		1		Request for expedited examination of a design application	
SUBTOTAL (2)	Oti	Other fee (specify)				
**or number previously paid, if greater, For Reissues, see above	*R	educed	by Ba	sıc Filir	ng Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY		Complete (if a	Complete (if applicable)			
Name (Print/Type)	Thomas M. Holman	Registration No. (Attorney/Agent)	Telephone	(941) 458-8527		
Signature	270	man	Date	12/27/01		

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